



Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, Virginia 23219

<http://www.dmas.state.va.us>

MEDICAID MEMO

TO: All Providers of Outpatient Mental Health Services who participate in the Virginia Medical Assistance Program, Managed Care and Organizations providing services to Virginia Medicaid recipients and holders of the *Psychiatric Services*, and *Mental Health Clinic* Manuals

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services

MEMO Special

DATE 7/1/2003

SUBJECT: Clarification of New Pre-Authorization Requirements for Outpatient Psychiatric Services

The purpose of this memo is to clarify the changes to the pre-authorization requirements and process for certain services reimbursable by Medicaid effective July 1, 2003. These changes were outlined in the May 1, 2003 Medicaid Memo, Subject: Implementation of the New Virginia Medicaid Management Information System (MMIS). These clarifications will be added to the appropriate manuals at the time of manual revision.

Effective July 1, 2003, within the initial year of treatment, up to five outpatient psychotherapy sessions, do not require pre-authorization. After the first five outpatient psychotherapy sessions, pre-authorization is required for the sixth, and all subsequent sessions. Additionally, all outpatient psychotherapy sessions after the initial year of treatment must be pre-authorized. Providers may request any number of sessions when they submit their pre-authorization request; however, the total number of sessions in any treatment year is limited to a total of 26 visits.

The "initial year of treatment" is defined as the 12-month period following the date of the first treatment session, by any Medicaid psychotherapy provider. For example: if a client has their first treatment session on July 25, 2003, the client's initial year of treatment will end July 24, 2004.

To request pre-authorization, a DMAS-351R along with a DMAS-412 must be completed. Both forms can be submitted by fax directly to DMAS at:

Local(804)225-2603

Toll-free(866)248-8796

The psychiatric diagnostic interview (90801) or medication management only (90862) visits are not included as a session. These codes do not require pre-authorization. The psychiatric diagnostic interview (90801) is limited to one interview every 12 months.

For those clients who have Medicare Part B Coverage, pre-authorization is not necessary if a Medicare participating provider is rendering the service.

Clients who have begun their initial year of treatment before July 1, 2003, are entitled to the 26 session as authorized by the previous regulations. Pre-authorization is required before the 27th session. Clients with an existing pre-authorization for outpatient psychiatric services that extends beyond July 1, 2003, may continue to utilize its remaining limits.

Pre-authorizations for services cannot be retroactive for services provided after July 1, 2003. Therefore, at the time of the initial evaluation, all information (such as the emergency nature of the case) must be included on the pre-authorization request. The turnover time for a pre-authorization request is seven to ten days.

The pre-authorization number issued must be used on all claims submitted. The granting of a pre-authorization does not guarantee payment of a claim. You must verify the recipient's Medicaid eligibility before services are rendered.

For more information regarding pre-authorization requirements and process for certain services reimbursable by Medicaid effective July 1, 2003 and the new MMIS, please refer to the DMAS website at www.dmas.state.va.us and navigate to the 'What's New' web link for Frequently Asked Questions.

COPIES OF MANUALS

DMAS publishes copies of its provider manuals and provider manual up-date transmittals on its website at www.dmas.state.va.us. The provider manuals and transmittals can be viewed on and printed from the website. The transmittals describe the updated materials and manual chapters and pages revised. For a list of updates, click on "up-date transmittals" in the "Provider Manuals" column. If you do not have access to the Internet, or would like a paper copy of a manual, you can order these by contacting Commonwealth-Martin at 804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

"HELPLINE"

The "HELPLINE" is available Monday through Friday from 8:30 a.m. to 4:30 p.m., except State holidays, to answer questions. The "HELPLINE" numbers are:

786-6273

Richmond area

1-800-552-8627

All other areas

Please remember that the "HELPLINE" is for provider use only.